

County: Kenosha  
 GRANDE PRAIRIE HEALTH & REHABILITATION  
 10330 PRAIRIE RIDGE BOULEVARD

Facility ID: 3850

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PLEASANT PRAIRIE 53158 Phone: (262) 612-2800  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/01): 118  
 Total Licensed Bed Capacity (12/31/01): 118  
 Number of Residents on 12/31/01: 83

Ownership:  
 Highest Level License:  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 61

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		81.9
Supp. Home Care-Personal Care	No					1 - 4 Years		18.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.6	More Than 4 Years		0.0
Day Services	No	Mental Illness (Org./Psy)	21.7	65 - 74	16.9			-----
Respite Care	Yes	Mental Illness (Other)	10.8	75 - 84	38.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	32.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	6.0	95 & Over	8.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	14.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	14.5		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	18.1	65 & Over	96.4	-----		
Transportation	No	Cerebrovascular	13.3		-----	RNs		13.1
Referral Service	Yes	Diabetes	1.2	Sex	%	LPNs		8.8
Other Services	Yes	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	28.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	71.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	2	5.7	115	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.4
Skilled Care	30	100.0	323	29	82.9	100	0	0.0	0	17	100.0	165	0	0.0	0	1	100.0	250	77	92.8
Intermediate	---	---	---	4	11.4	85	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	30	100.0		35	100.0		0	0.0		17	100.0		0	0.0		1	100.0		83	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01			
				% Needing Assistance of One Or Two Staff	Total Number of Residents
Percent Admissions from		Activities of	%	% Totally Dependent	
Private Home/No Home Health	1.0	Daily Living (ADL)	Independent		
Private Home/With Home Health	3.4	Bathing	2.4	65.1	83
Other Nursing Homes	5.2	Dressing	12.0	32.5	83
Acute Care Hospitals	84.8	Transferring	22.9	24.1	83
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	14.5	19.3	83
Rehabilitation Hospitals	4.1	Eating	55.4	22.9	83
Other Locations	1.4			7.2	83
Total Number of Admissions	290	*****			
Percent Discharges To:		Continence	%	Special Treatments	%
Private Home/No Home Health	13.1	Indwelling Or External Catheter	4.8	Receiving Respiratory Care	0.0
Private Home/With Home Health	55.5	Occ/Freq. Incontinent of Bladder	47.0	Receiving Tracheostomy Care	0.0
Other Nursing Homes	3.4	Occ/Freq. Incontinent of Bowel	36.1	Receiving Suctioning	0.0
Acute Care Hospitals	10.6	Mobility		Receiving Ostomy Care	0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	9.6	Receiving Tube Feeding	1.2
Rehabilitation Hospitals	0.0			Receiving Mechanically Altered Diets	18.1
Other Locations	3.8	Skin Care		Other Resident Characteristics	
Deaths	13.6	With Pressure Sores	1.2	Have Advance Directives	51.8
Total Number of Discharges		With Rashes	1.2	Medications	
(Including Deaths)	236			Receiving Psychoactive Drugs	42.2

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	51.7	82.7	0.63	83.8	0.62	84.3	0.61	84.6	0.61
Current Residents from In-County	85.5	82.1	1.04	84.9	1.01	82.7	1.03	77.0	1.11
Admissions from In-County, Still Residing	19.3	18.6	1.04	21.5	0.90	21.6	0.89	20.8	0.93
Admissions/Average Daily Census	475.4	178.7	2.66	155.8	3.05	137.9	3.45	128.9	3.69
Discharges/Average Daily Census	386.9	179.9	2.15	156.2	2.48	139.0	2.78	130.0	2.98
Discharges To Private Residence/Average Daily Census	265.6	76.7	3.46	61.3	4.34	55.2	4.81	52.8	5.03
Residents Receiving Skilled Care	95.2	93.6	1.02	93.3	1.02	91.8	1.04	85.3	1.12
Residents Aged 65 and Older	96.4	93.4	1.03	92.7	1.04	92.5	1.04	87.5	1.10
Title 19 (Medicaid) Funded Residents	42.2	63.4	0.67	64.8	0.65	64.3	0.66	68.7	0.61
Private Pay Funded Residents	20.5	23.0	0.89	23.3	0.88	25.6	0.80	22.0	0.93
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	32.5	30.1	1.08	37.7	0.86	37.4	0.87	33.8	0.96
General Medical Service Residents	0.0	23.3	0.00	21.3	0.00	21.2	0.00	19.4	0.00
Impaired ADL (Mean)	50.1	48.6	1.03	49.6	1.01	49.6	1.01	49.3	1.02
Psychological Problems	42.2	50.3	0.84	53.5	0.79	54.1	0.78	51.9	0.81
Nursing Care Required (Mean)	2.7	6.2	0.44	6.5	0.42	6.5	0.42	7.3	0.37